



SEVERE ACUTE RESPIRATORY SYNDROME

FACT SHEET

Isolation and Quarantine

To contain the spread of a contagious illness, public health authorities rely on many strategies. Two of these strategies are isolation and quarantine. Both are common practices in public health and both aim to control exposure to infected or potentially infected individuals. Both may be undertaken voluntarily or compelled by public health authorities. The two strategies differ in that isolation applies to people who are known to have an illness and quarantine applies to those who have been exposed to an illness but who may or may not become infected.

ISOLATION: FOR PEOPLE WHO ARE ILL

Isolation of people who have a specific illness separates them from healthy people and restricts their movement to stop the spread of that illness. Isolation allows for the focused delivery of specialized health care to people who are ill, and it protects healthy people from getting sick. People in isolation may be cared for in their homes, in hospitals, or at designated health care facilities. Isolation is a standard procedure used in hospitals today for patients with tuberculosis (TB) and certain other infectious diseases. In most cases, isolation is voluntary; however, many levels of government (federal, state, and local) have basic authority to compel isolation of sick people to protect the public.

QUARANTINE: FOR PEOPLE WHO HAVE BEEN EXPOSED BUT ARE NOT ILL

Quarantine, in contrast, applies to people who have been exposed and may be infected but are not yet ill. Separating exposed people and restricting their movements is intended to stop the spread of that illness. Quarantine is medically very effective in protecting the public from disease.

States generally have authority to declare and enforce quarantine within their borders. This authority varies widely from state to state, depending on the laws of each state. The Centers for Disease Control and Prevention (CDC), through its Division of Global Migration and Quarantine, also is empowered to detain, medically examine, or conditionally release individuals suspected of carrying certain communicable diseases. This authority derives from section 361 of the Public Health Service Act (42 U.S.C. 264), as amended.

SARS and Isolation

SARS patients in the United States are being isolated until they are no longer infectious. This practice allows patients to receive appropriate care, and it contains the potential spread of the illness. Those who are more severely ill are being cared for in hospitals. Those whose illness is mild are being cared for at home. Individuals being cared for at home have been asked to avoid contact with other people and to remain at home until 10 days after their symptoms have resolved. (For more information on SARS infection control precautions, visit the CDC website at <http://www.cdc.gov/ncidod/sars>.)

SARS and Quarantine

To date, CDC has recommended isolation of individuals with SARS, but has not compelled quarantine or isolation of these individuals.

For more information, see Questions and Answers: Isolation and Quarantine at <http://www.cdc.gov/ncidod/sars/quarantineqa.htm>.

For more information, visit <http://www.cdc.gov/ncidod/sars> or call the CDC public response hotline at (888) 246-2675 (English), (888) 246-2857 (Español), or (866) 874-2646 (TTY)

April 3, 2003

Page 1 of 1